[Company Name and Logo]

Employee Termination Checklist

Employee Name:

Supervisor/Manager Name:

Department Name and #:

Employee’s Current or Forwarding Address (if changed):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee’s Phone number:

Last day worked:

**Instructions**: Supervisors/Managers: *Please put your initials and the date next to the action that has been taken.*

**□ Voluntary Termination □ Involuntary Termination**

*(Steps to follow)*

**\_\_\_\_\_\_\_\_\_** Obtain resignation in writing from Employee \_\_\_\_\_\_\_\_\_\_ a) Corrective action followed

\_\_\_\_\_\_\_\_\_\_ b) Employee explanation provided

**□ Other** (*Death, Military, etc*.) \_\_\_\_\_\_\_\_\_\_ c) Human Resources reviewed information

\_\_\_\_\_\_\_\_\_ Received supporting documentation \_\_\_\_\_\_\_\_\_\_ d) Letter of termination including reasons

List:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Review With Employee Collect

\_\_\_\_\_\_\_\_\_Effective Date of Termination

\_\_\_\_\_\_\_\_\_\_ Uniform

\_\_\_\_\_\_\_\_\_ Final wages \_\_\_\_\_\_\_\_\_\_ All keys (locker, bldg., desk, etc.)

* Check to be picked up Where?\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ ID Cards
* Check to be mailed Where?\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ Cellular phones

\_\_\_\_\_\_\_\_\_ Benefit pay \_\_\_\_\_\_\_\_\_\_ Credit cards

* Accrued time off \_\_\_\_\_\_\_\_\_\_ Time card
* When received \_\_\_\_\_\_\_\_\_\_ ID cards

\_\_\_\_\_\_\_\_\_ Benefits information summary \_\_\_\_\_\_\_\_\_\_ Laptop computers

\_\_\_\_\_\_\_\_\_\_ Reference/Training/Project Manuals

\_\_\_\_\_\_\_\_\_ Rehire eligibility: \_\_\_\_\_\_\_\_\_\_ Other proprietary information

\_\_\_\_\_\_\_\_\_ How references will be handled \_\_\_\_\_\_\_\_\_\_ Parking tag (return to Parking Services)

\_\_\_\_\_\_\_\_\_\_ Any other property: \_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_ Subsequent access to premises

**Give to Employee (Optional) Cancel**

\_\_\_\_\_\_\_\_\_ Exit Interview \_\_\_\_\_\_\_\_\_\_ Computer access

\_\_\_\_\_\_\_\_\_ Contact information for HR \_\_\_\_\_\_\_\_\_\_ Credit cards

\_\_\_\_\_\_\_\_\_ Contact information for Dept. \_\_\_\_\_\_\_\_\_\_ Security codes

\_\_\_\_\_\_\_\_\_\_ Direct Deposit

\_\_\_\_\_\_\_\_\_\_ Cancel email

Other \_\_\_\_\_\_\_\_\_ Remove from phone list

\_\_\_\_\_\_\_\_\_ Clean work area, remove personal belongings

Notes:

# 

# Signature of Supervisor

# Printed Name and Title of Supervisor

# Date: